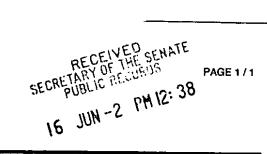
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## FEC FORM 2 STATEMENT OF CANDIDACY



(a) Name of Candidate (in full)     AUGUST L WOLF		<del></del>						
(b) Address (number and street) PO BOX 113255	☐ Check if address changed			2. Candidate's FEC Identification Number S6CT05090				
(c) City, State, and ZIP Code				3. Is This		lew	Amende	
STAMFORD		CT 0691	1	Stateme	nt 🔲 (I	N) OR	<b>X</b> (A)	
Party Affiliation     REPUBLICAN PARTY	5. Office Sought Senate		6. State & Dist	rict of Candidat	0			
	1.					<del></del>		
DE	SIGNATION OF P	PRINCIPAL	CAMPAIGN	I COMMIT	TEE			
7. I hereby designate the following nat	med political committee a	s my Principal (	Campaign Comm		2016 rear of elec	election	n(s).	
NOTE: This designation should be	iled with the appropriate	office listed in t	he instructions.					
(a) Name of Committee (in full) AUGUST WOLF FO	R SENATE			•				
(b) Address (number and street) PO BOX 113255		<del></del>	•	· · · · · · · · · · · · · · · · · · ·				
(c) City, State, and ZIP Code	<del> </del>		<del></del>	<del></del>		<del></del>		
STAMFORD			CT	06911				
Note: This designation should be to the full of t	illed with the principal can	npaign committ	96.					
AYOTTE BLUNT M	ORAN WOLF V	ICTORY F	FUND					
(b) Address (number and street) 228 S WASHINGTON STREE	T SUITE 115	<u> </u>	· <u>-</u>					
(c) Cily, State, and ZIP Code						•		
ALEXANDRIA			VA	22314				
I certify that I have exa	mined this Statement an	d to the best of	my knowledge a	nd belief it is to	ие, солтес	t and comple	te.	
Signature of Candidate	4	,		Date				
AUGUST L WOLF	mel,	7		05/26/2016	i			
NOTE: Submission of false, erroneous	, or incomplete information	n may subject (	the person signir	ng this Stateme	nt to pena	llies of 2 Ų.S	s.C. §437g.	
. !	<u> </u>						FORM 2 (REV. 02/	

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